REMARKS

Claims 4; 7; 8; 10; 12; 16; 17; 19; 22; 23; 29; 30; and 34 have been amended. Claims 1 to 3; 5; 6; 11; 21; and 39 to 44 have been canceled.

Claims 4; 7; 8; 10; 12; 16; 17; 19; 22; 23; 29; 30; 34; 35; 36; and 37 remain in the application. Of these, claims 4 is the sole independent apparatus claim, and claim 34 is the sole independent method claim.

Claims 9; 13; 14; 15; 18; 20; 24; 25; 26; 27; 28; 31; 32; 33; and 38 stand withdrawn, pending reinstatement upon allowance of a generic claim, which applicant believes claim 4 (apparatus) and claim 34 (method) are. Withdrawn claims 9; 13; 14; 15; 18; 20; 24; 25; 26; 31; 32; 33; and 38 have been amended to reflect the cancellation of various originally filed independent claims and to reflect the amended claim terminology.

The Examiner has objected to the form of originally filed claim 34. Claim 34 has been amended to overcome this objection.

The originally filed claims stand rejected under 35 USC § 102(e) based upon Carpentier US 6,338,740.

Independent claim 4 has been amended to define an implant to reshape a heart valve. The implant comprises an elastic wire-form body sized and configured to extend between the leaflet commissures of the heart valve at or above the heart valve annulus. As further defined in amended claim 4, the elastic wire-form body has a spring constant capable of being elastically compressed out of a normal unloaded condition into an elastically loaded compressed condition. As further defined in amended claim 4, spaced-apart struts are appended to the body to contact tissue at or near the leaflet commissures when the elastic wire-form body extends in its elastically compressed condition between the leaflet commissures. The struts are sized and configured to displace and stretch tissue along the major axis of the heart valve (i.e., between the commissures) as a result of net compression of the elastic wire-form body as it extends at or above the heart valve annulus, to thereby reshape the heart valve annulus. Comparable amendments have been made to method claim 34.

Carpentier does not teach or suggest an implant comprising an elastic wire-form body sized and configured to extend between the leaflet commissures of the heart valve at or above a heart valve annulus. Carpentier's heart valve extends below the heart valve annulus, in the downstream direction of the natural leaflets (see Col. 2, lines 28 to 36). Further, Carpentier does not teach or suggest placing an elastic wire-form body with a spring constant into an elastically loaded compressed condition between the commissures of a heart valve to displace and stretch tissue along the major axis of the heart valve (i.e., between the commissures), to thereby reshape the heart valve annulus. Carpentier's prosthesis serves to support artificial leaflets within an annulus. It does not displace and stretch tissue to reshape the heart valve annulus.

Claims 4; 7; 8; 10; 12; 16; 17; 19; 22; 23; 29; 30; 34; 35; 36; and 37 are believed to be condition for allowance. Applicant requests the opportunity to reinstate dependent withdrawn claims 9; 13; 14; 15; 18; 20; 24; 25; 26; 27; 28; 31; 32; 33; 33; and 38.

Respectfully Submitted,

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